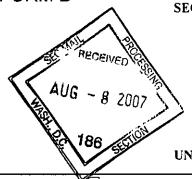
1316972

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SE	SEC USE ONLY							
Prefix	Serial							
	<u> </u>							
D	ATE RECEIVED							
1	1							

Name of Offering check Private Placement of Limited Partr		ne has changed, and indicate change.) acv Fund, L.P.		·	
Filing Under (Check box(es) that a	pply): Rule 504 Rule 5	505 Rule 506 Section	4(6) ULOE	PROC	CESSED
Type of Filing:	ing 🗵 Amendment				,
		BASIC IDENTIFICATION DATA		P_AUG	1 0 2007
1. Enter the information requested	about the issuer			1	; U 2001
Name of Issuer	this is an amendment and name	has changed, and indicate change.)		THO	MSON
Insignia Legacy Fund, L.P.					ΜΟΙΔΙ
Address of Executive Offices	(No. and Street, City,	State, Zip Code)	Telephone N	umber (Includir	
114 West Seventh Street, Suite	1300, Austin, Texas 78701		(512) 637-9	700	
Address of Principal Business Ope (if different from Executive Office		State, Zip Code) Telephone	Number (Including A	rea Code)	
Brief Description of Business Investment Partnership					
Type of Business Organization					
corporation	×	limited partnership, already formed			other (please specify):
business trust		limited partnership, to be formed			
Actual or Estimated Date of Inco	rporation or Organization:	Month 0 5	Year 0 3	⊠ Actual	☐ Estimated
Jurisdiction of Incorporation or C	organization: (Enter two-letter U	J.S. Postal Service abbreviation for State	: DE		
·	CN for Canada;	FN for other foreign jurisdiction)			

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required. Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2-97)



A. BASIC IDENTIF	ICATION DATA		
2. Enter the information requested for the following:			
X Each promoter of the issuer, if the issuer has been organized within the part Each beneficial owner having the power to vote or dispose, or direct the		r more of a class o	of equity securities of the
issuer; X Each executive officer and director of corporate issuers and of corporate	general and managing partner	rs of partnership is	suers; and
X Each general and managing partner of partnership issuers.			₩ O 1 1/
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	☐ Director	⊠ General and/or Managing Partner
Full Name (Last name first, if individual) Meritage Capital, L.P., General Partner			
Business or Residence Address (Number and Street, City, State, Zip Code) 114 West Seventh Street, Suite 1300, Austin, Texas 78701	***************************************		
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	Director	✓ General and/or Managing Partner
Full Name (Last name first, if individual) MFI Capital, LLC, General Partner of the General Partner			
Business or Residence Address (Number and Street, City, State, Zip Code)			
248 Addie Roy Rd, Suite C200, Austin, Texas 78746			(I) a
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	☑ General and/or Managing Partner
Full Name (Last name first, if individual) St. James's Park Holding, LLC, General Partner of the General Partner			· = · · = · · ·
Business or Residence Address (Number and Street, City, State, Zip Code)			
3801 N. Capital of Tx Hwy., E240, #62, Austin, Texas 78746			
Check Box(es) that Apply: Promoter Beneficial Owner	☑Executive Officer	☐ Director	☑General and/or Managing Partner
Full Name (Last name first, if individual) Meredith, Thomas J., Chief Executive Officer of MFI Capital, LLC			
Business or Residence Address (Number and Street, City, State, Zip Code)	 		<u></u>
114 West Seventh Street, Suite 1300, Austin, Texas 78701			
Check Box(es) that Apply: Promoter Beneficial Owner	☑Executive Officer	☐ Director	☑General and/or Managing Partner
Full Name (Last name first, if individual) Smith, Alex C., Manager of St. James's Park Holding, LLC			
Business or Residence Address (Number and Street, City, State, Zip Code) 114 West Seventh Street, Suite 1300, Austin, Texas 78701			
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			8
Business or Residence Address (Number and Street, City, State, Zip Code)			
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)			ividiaging radici
Business or Residence Address (Number and Street, City, State, Zip Code)			
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	☐ Director	General and/or
Full Name (Last name first, if individual)			Managing Partner
Business or Residence Address (Number and Street, City, State, Zip Code)			

															
									TION						
1. Ha	is the	issuer	sold or						redited i if filing			offering	?	Yes □	No ⊠
2. W	·										\$ <u>300</u> .	.000			
3. Do	es th	ie offeri	ing pern	nit joint	ownersl	nip of a	single ui	nit:						Yes ⊠	No
inc of reg (5)	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.											n with sales r or dealer nore than five	_	_	
Full Na	me (l	Last na	me first,	if indiv	ridual)										
Busines	s or	Resider	ice Add	ress (Nu	imber ai	nd Street	, City, S	State, Zij	p Code)					<u>-</u>	
Name o	f Ass	sociated	l Broker	or Dea	ler										
									ırchaser		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*******		🗆	All States
[A	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[НП]	[ID]		
[1]	L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[M	[T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	(OK)	[OR]	[PA]		
[R	(L)	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]		
Full Na	me (l	Last na	me first,	if indiv	idual)										
Busines	s or	Resider	nce Add	ress (Nu	ımber ar	nd Street	, City, S	state, Zi _l	p Code)						
Name o	f Ass	sociated	l Broker	or Dea	ler										
States in	n Wh	ich Per	son List	ed Has	Solicite	d or Inte	nds to S	olicit Pı	ırchaser	s					
(Check	"All	States"	or chec	k indivi	dual Sta	ites)							***************************************	🗆	All States
[A	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[1]	L}	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[M	[T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[R	I]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Na	me (l	Last nai	me first,	if indiv	idual)										
Busines	s or l	Resider	ice Add	ress (Nu	mber ar	nd Street	, City, S	state, Zij	p Code)						
Name o	f Ass	sociated	i Broket	or Dea	ler										
									rchaser						All States
													(II)	L	All States
· -	•	[AK]	[AZ]		[CA]		[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[]]	-	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]		[MI]	[MN]	[MS]	[MO]		
{M	_	[NE]	[NV]	[NH]	[N]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[R	IJ	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	(PR)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities				
	offered for exchange and already exchanged. Type of Security		ggregate ring Price	An	nount Already Sold
	Debt	\$	0	\$	0
	Equity	\$	0	\$	0
	□ Common □ Preferred	-		Ψ	
		¢	0	¢	0
	Convertible Securities (including warrants)	\$	147,884.88	Φ	6,147,884.88
	Partnership Interests	_		_ \$ <u>1/</u> \$	0,147,004.00
	Other (Specify)	\$	0	- '	
	Total	\$ 176,	147,884.88	· > 1/	6,147,884.88
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."				
			lumber ivestors	Do	Aggregate ollar Amount of Purchases
	Accredited Investors		39	\$ 17	6,147,884.88
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE			-	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
	Type of offering		ype of ecurity	Do	ollar Amount Sold
	Rule 505		N/A	\$	N/A
	Regulation A		N/A	\$	N/A
	Rule 504		N/A	\$	N/A
	Total		<u>N/A</u>	\$	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securithis offering. Exclude amounts relating solely to organization expenses of the issuer. The information be given as subject to future contingencies. If the amount of an expenditure is not known, furnish estimate and check the box to the left of the estimate.	ition may an			
	Transfer Agent's Fees		🗆	\$	0
	Printing and Engraving Costs		🛘	\$	0
	Legal Fees		🗆	\$	1,000
	Accounting Fees.		🗆	\$	0
	Engineering Fees.			\$	0
	Sales Commissions (specify finder's fees separately)		🗆	\$	0
	Other Expenses (identify)			\$	0
	Total		🗆	\$	1,000
					., -

	C. OFFERING PRICE, N	UMBER OF INVE	STORS, EXPENS	ES AND USE	OF PR	OCEEDS	S
	b. Enter the difference between the aggregation and total expenses furnished in response to proceeds to the issuer."	Part C-Question 4.a. T	his difference is the "	adjusted gross			\$ <u>176,146,884.88</u>
5.	Indicate below the amount of the adjusted geach of the purposes shown. If the amount check the box to the left of the estimate. The proceeds to the issuer set forth in response to	for any purpose is not keep total of the payments	nown, furnish an esti listed must equal the	mate and			
					O: Dire	ments to ficers, ectors, & filiates	Payments To Others
	Salaries and fees				\$		\$
	Purchase of real estate				\$		\$
	Purchase, rental or leasing and install	ation of machinery and	equipment		\$		\$
	Construction or leasing of plant build	ings and facilities			\$		\$
	Acquisition of other businesses (inclumate may be used in exchange for the asse				\$		\$
	Repayment of indebtedness				\$		\$
	Working capital				\$		\$
	Other (specify) (investments)				\$	X	\$ <u>176,146,884.88</u>
	Column Totals		•••••		\$		\$ <u>176,146,884.88</u>
	Total Payments Listed (column totals	added)				\$ <u>176.</u>	146,884.88
		D. FEDERA	L SIGNATURE				
sign	ssuer has duly caused this notice to be signed ture constitutes an undertaking by the issuer mation furnished by the issuer to any non-ac-	to furnish to the U.S. S	ecurities and Exchang	ge Commission,	filed un upon wr	der Rule 50 itten reques	05, the following st of its staff, the
Iss	uer (Print or Type)	Signature		Date		·	
Ins	ignia Legacy Fund, L.P.	aly C.	Six	August 6	, 2007		
	ne of Signer (Print or Type)	Title of Signer (Print	or Type)				
Al	x C. Smith	Manager of St. James Partner	's Park Holding LLC	, General Partne	r of Mer	itage Capit	al, L.P., General

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes □	No ⊠
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is fit (17 CFR 239.500) at such times as required by state law.	led, a notice of	on Form D

- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date				
Insignia Legacy Fund, L.P.	alyc. Sive	August 6, 2007				
Name of Signer (Print or Type)	Title of Signer (Print or Type)					
Alex C. Smith	Manager of St. James's Park Holding LLC, General Partner of Meritage Capital, L.P., Gener Partner					

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3		4					
	accredited S (Pa	sell to non- investors in tate art B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре с	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
	168	No	interesis	HIVESTORS	Amount	Hivestors	Amount			
AL										
AK AZ										
						\ <u>-</u>				
AR CA										
со		No	Limited Partnership Interests \$3,000,000.00	1	\$3,000,000.00	0	\$0	No		
СТ			\$3,500,500.00							
DE		No	Limited Partnership Interests \$4,950,000.00	1	\$4,950,000.00	0	\$0	No		
DC										
FL		No	Limited Partnership Interests \$2,459,392.89	2	\$2,459,392.89	0	\$0	No		
GA										
HI										
ID										
IL										
IN										
IA										
KS										
KY										
LA										
ME										
MD										

APPENDIX

1		2	3		4					
	accredited S (Pa	sell to non- investors in tate urt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре с	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
MA		No	Limited Partnership Interests \$2,000,000.00	1	\$2,000,000.00	0	\$0	No		
MI										
MN										
MS										
МО										
МТ		No	Limited Partnership Interests \$2,000,000.00	1	\$2,000,000.00	0	\$0	No		
NE										
NV										
NH										
NJ										
NM	·									
NY										
NC										
ND										
ОН										
ок										
OR										
PA		No	Limited Partnership Interests \$5,000,000.00	1	\$5,000,000.00	0	\$0	No		
RI										
sc										
SD										

APPENDIX

1		2	3		4			5		
	accredited S (Pa	sell to non- investors in tate art B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре с	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
TN										
тх		No	Limited Partnership Interests \$87,712,000.00	26	\$87,712,000.00	0	\$0	No		
UT		1								
VT				-						
VA										
WA		No	Limited Partnership Interests \$2,500,000.00	1	\$2,500,000.00	0	\$0	No		
wv										
WI										
WY										
PR										

END